

POLICE DEPARTMENT
BALTIMORE, MARYLAND

☐ Person ☐ Property ☐ Vehicle ☒ Miscellaneous

Domestic Related ☐

Gang Related ☐

Juvenile Related ☐

Hate Crime ☐

1 Crime / Incident Trespassing		Attempt <input type="checkbox"/>	2 Complaint Number 129D2550
3 Location of Offense / Incident (Exact Street Address) 555 Russell St.		Page 1 of 2	
4 Date / Time Occurred 4APR12 1555		5 Date / Time Reported 4APR12 1555	
11 Location Given by Dispatcher On View		12 Companion Report No.	
18 Describe Location of Offense or Type of Premise Stadium		19 Reported by Crime Watcher <input type="checkbox"/> Yes <input type="checkbox"/> No	

6 Unit 2300	7 Post of Occurrence 941	8 Reporting Area	9 Street Code	10 CAD Number 1961	11 Location Given by Dispatcher On View	12 Companion Report No.
13 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed	14 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	15 Follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	16 Crime Code	17 Crime Classification	18 Describe Location of Offense or Type of Premise Stadium	
20 Complainant / Victim Name (Last, First, MI), or Firm Name if Business Baltimore Orioles Baseball Club Inc.		Residence / Address (Include City, County, State, Zip) 555 Russell St.			Sex	Race
Where Employed or School Attending (Include City Located)		Occupation	Hours of Employment	Residence Phone 410 547	Other Phone	Sobriety
21 Injuries and Location on Body		Victim's Condition	Victim Hospitalized <input type="checkbox"/> Yes <input type="checkbox"/> No	Facility	22 Victim / Assailant Relationship	23 Current / Former Cohabitant <input type="checkbox"/> Yes <input type="checkbox"/> No

24 Reporting Person Name (Last, First, MI) Diamond, N	Sex	Race	Age	DOB	Address (Include City, County, State, Zip) 242 W. 29TH ST 21212	Residence Phone 4103962444	Other Phone
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25 Witness Parent/Guardian <input type="checkbox"/>	Name (Last, First, MI) Cummings, Kevin	Address (Include City, County, State, Zip) 333 W. Camden St Ballpark Ops	Residence Phone 410 547	Other Phone
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26 Suspect Name (Last, First, MI) Harvey, Mark W.	Address (Include City, County, State, Zip) 1 Severn Rd. Severn MD 21144	Sex W	Race W	Age	DOB 4/6/1986	Height 6'3"	Weight 240
Complexion W	Hair Color/Length/Style Blonde short	Hat	Eyes	Facial Hair	Teeth	Shirt/Coat Black Cape	
Pants Batman Underwear	Shoes	Additional Descriptors (Tattoos, Piercings, Scars, Marks, Accent, etc.)				Arrest Number	

27 Trademarks of Suspect(s) (Action / Conversation) Ran on field during game play	28 Point of Entry	29 Location Last Seen	30 Manner of Escape	31 Direction of Escape
32 Weapon / Means of Attack	33 Method Used to Commit Crime	34 Type of Property Taken	35 Total Loss Value	

36 Vehicle Information <input type="checkbox"/> Suspect <input type="checkbox"/> Victim <input type="checkbox"/> Stolen <input type="checkbox"/> Towed <input type="checkbox"/> Other	Tag Number	State	Expiration	Vehicle Year	Make	Model	Body Style	Color	Mileage
Vehicle Identification Number (VIN)		Ignition Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Keys in Ignition <input type="checkbox"/> Yes <input type="checkbox"/> No	Doors Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	Windows Closed <input type="checkbox"/> Yes <input type="checkbox"/> No	Radio in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Battery in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Spare Tire in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	Trunk Locked <input type="checkbox"/> Yes <input type="checkbox"/> No

37 Registered Owner Name (Last, First, MI)	Sex	Race	Age	DOB	Address (Include City, County, State, Zip)
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38 Recovered by	39 Method of Theft	40 Evidence of Stripping / Tampering	41 Repo. Check <input type="checkbox"/> Yes <input type="checkbox"/> No	42 Tow List Check <input type="checkbox"/> Yes <input type="checkbox"/> No	43 Owner Notified <input type="checkbox"/> Yes <input type="checkbox"/> No
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44 Tow Information	Location Towed From	Location Towed To	Towed by	Tow Truck Operator Signature
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45 Detective Notified	Sequence No.	Assignment	Unit Number	Date	Time	46 Medical Examiner Notified	Date	Time
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47 Crime Lab Technician Name	Unit Number	Time	48 Hot Desk Person Notified	Time
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49 Communications Supervisor Notified <input type="checkbox"/> Yes <input type="checkbox"/> No	50 Citywide Broadcast <input type="checkbox"/> Yes <input type="checkbox"/> No	Time	51 Victim Assistance/Incident Information Form(s) Provided <input type="checkbox"/> Yes <input type="checkbox"/> No	Explain
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52 Copies Forwarded To

Cont'd Sections	Narrative: (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property, list property inventory number(s) when applicable. (3) Describe details of incident. Include all steps taken in preliminary investigation. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) List all arrests, including Arrest Numbers and charges.
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On 04 April 2012 at approximately 15:55hrs, Deft. Mark Harvey was detained by this Officer after trespassing on private property (Orioles Park at Camden Yard, 555 Russell St., Baltimore, MD 21201) by way of running onto the field during game play. The Deft. jumped from Section 98 bleacher's wall (8ft. drop) then ran through the outfield of the ball field, where he was arrested by this officer. The Deft. was warned at the start of the game by the public address announcer that there is no trespassing on the field during the game, and that doing so will subject you to arrest. Deft. was properly identified by Maryland Driver's license, warrant check was conducted with negative results. Deft. was then transported to First Aide stand for treatment to an injured right ankle from the jump. Deft. was then transported to University Medical Center for further treatment.	
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53 Reporting Officer Name (PRINT CLEARLY) N. Diamond	Sequence No. 1912	Assignment NED	Signature
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54 Approving Supervisor Rank and Name	Sequence No.	Assignment	Signature
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55 RMS Data Entered By	Sequence No.	Date	Time	56 Reviewer	57 Referred To
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REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK

POLICE DEPARTMENT
BALTIMORE, MARYLAND

☒ Continuation ☐ Follow Up

Person ☐ Property ☐ Miscellaneous ☒ Vehicle ☐ Missing Person ☐ Custody ☐

1 Crime / Incident Trespassing <input type="checkbox"/> Attempt	2 Complaint Number 129D2550
3 Location of Offense / Incident (Street Address, Zip) 555 Russell St	
4 Date / Time of This Report 4APR12 1555	5 Arrest / Custody Number
6 Unit 2300	7 Post of Occurrence 941
8 Reporting Area	9 Street Code
10 CAD Number 1961	11 Original Report Date / Time 4APR12 1555
12 Offense / Incident Changed From	
13 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed	14 Multiple Clearance <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
15 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	16 Follow-up <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
17 Crime Code	18 Crime Classification

19 Complainant/ Victim	Name (Last, First, MI), or Firm Name if Business Baltimore Orioles Baseball Club Inc.	Residence / Address (Include City, County, State, Zip) 333 W. Camden St. 21201	Sex	Race	Age	DOB
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20 Copies Forwarded To

Cont'd Sections Narrative: (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property; list property inventory number(s) when applicable. (3) Record all activity and all developments in case subsequent to last report. Include names and arrest numbers of all persons arrested. Explain any crime/incident classification change. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complaint/case numbers.

Once cleared Deft. was transported to Central Booking Detention Center for processing.

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21 I affirm and declare that the statements above are true to the best of my knowledge: Reporting Person's Signature Date

22 Reporting Officer Name (PRINT CLEARLY) N. Diamond	Sequence No. 1912	Assignment NED	Signature
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23 Approving Supervisor Rank and Name	Sequence No.	Assignment	Signature
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24 RMS Data Entered By	Sequence No.	Date	Time	25 Reviewer	26 Referred To
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